



9590 9402 5432 9189 6440 89

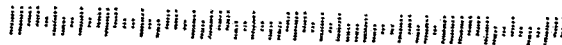
United States  
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box •

Law Offices of Robert Dodson  
1722 Main Street, Suite 200  
Columbia, SC 29201

First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

1-295150



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

SC Office of

1220  
Suite 300  
Columbia, SC 29201



9590 9402 5432 9189 6440 89

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *[Signature]* ☒ Agent ☐ Addressee

B. Received by (Printed Name)

*Angela G. Jones* 5-11-21

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

2. Article Number

7015 0640 0005 7305 9217

Delivery

(over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt